BRIEF TITLE	APPROVED DEADLINE	REASON	
DETAILS		POSITIONS/RECOMMENDATIONS	
	Sponsor		
	Program Departments, or Groups Affected		
	Applicants/ Proponents	Applicant	
		City Department	
		Other	
Discussion (Including Relationship to other Co Actions)	ouncil Opponents	Groups or Individuals	
		Basis of Opposition	
	Staff Recommendations	☐ For ☐ Against Reason Against	
	Board or Commission Recommendation	BY Personnel Board For Against No Action Taken For with revisions or conditions (See Details column for conditions)	
	CITY COUNCIL ACTIONS (For Council Use Only)	Pass Pass (As Amended) Council Sub. Without Recommendation Hold Do not Pass	

BILL NUMBER _____

GENERAL FACT SHEET

DETAILS	POLIC I/PRO	GRAWI IWIPACI	
	POLICY OR PROGRAM CHANGE	NO YES	
	OPERATIONAL IMPACT ASSESSMENT		
	FINANCES		
	COST AND REVENUE PROJECTIONS	COST of total project: \$ COST of this Ordinance/ Resolution \$	
		RELATED annual operating Costs \$	
		INCREASE REVENUE EXPECTED/YEAR \$	
	SOURCE OF FUNDS	CITY [Approximately] \$ \$ \$ \$ \$ NON CITY [Approximately] \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	%
	BENEFIT COST Front Foot	Average Assess	sment
	☐ Square Foot \$	\$ \$	

	APP	LICAB	LE D/	ATES:
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FACT SHEET PREPARED BY:

REVIEW BY:

REFERENCE NUMBER